STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received
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COVER PAGE

Filed Date: 04/04/2018 11:51 AM SAN: 031300023-STH-0023

Please type or print in ink.		<i>37</i> (14. 00	71000020 0111 0020
NAME OF FILER (LAST)	(FIRST)		(MIDDLE)
Pearce	Jeannine		
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
City Officials - City Council			
Division, Board, Department, District, if applicable	Your Position		
	Councilmembe	er - 2nd District	
▶ If filing for multiple positions, list below or on an attach	nment. (Do not use acronyms)		
Agency:	Position:		
2. Jurisdiction of Office (Check at least one box))		
☐ State	☐ Judge or Court Co	ommissioner (Statewi	ide Jurisdiction)
☐ Multi-County	County of		
X City of Long Beach	·		
3. Type of Statement (Check at least one box)			
Annual: The period covered is January 1, 2017, throperation December 31, 2017.	rough Leaving Office: (Check one)	Date Left/_	/
The period covered is///	, through	•	2017, through the date of
Assuming Office: Date assumed//			/, through
Candidate: Date of Election	and office sought, if different than Part 1:		
	Total number of pages including t	his cover page:	5
Schedules attached			
☐ Schedule A-1 - Investments – schedule attached			
✗ Schedule A-2 - <i>Investments</i> − schedule attached			
Schedule B - Real Property – schedule attached	Schedule E - Income – G	Gifts – Travel Paymei	nts – schedule attached
-or- ☐ None - No reportable interests on any sch	nedule		
5. Verification	cudio		
MAILING ADDRESS STREET	CITY	STATE	ZIP CODE
(Business or Agency Address Recommended - Public Document)	Lann Baach	0.4	00000
333 West Ocean Blvd., 14th floor, 333 West Ocean Blvd., 14th DAYTIME TELEPHONE NUMBER	floor Long Beach E-MAIL ADDRESS	CA	90802
(562) 570-6965	jeannine.pearce@lo	ngbeach.gov	
I have used all reasonable diligence in preparing this state herein and in any attached schedules is true and complet	ement. I have reviewed this statement and to the		dge the information contained
I certify under penalty of perjury under the laws of the	-	ue and correct.	
04/04/2018 11:51 AM	<u>.</u>	Electronic Sub	mission
Date Signed(month, day, year)	Signature(File the o	originally signed statement wit	

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

CALIFORNIA FORM / UU
FAIR POLITICAL PRACTICES COMMISSION
Name
Jeannine Pearce

(Ownership Interest is 10% or Greater)

▶ 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
TRU CONSULTING	
Name	Name
2475 Oregon Ave., Long Beach, Ca 90807	
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
☐ Trust, go to 2	☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Consulting Services	
SAID ANABUST VALUE IS A DRI IO A DI E LIOT DATE	END MADVET VALUE IS ADDITIONAL FOR THE
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: □ \$0 - \$1,999
\$2,000 - \$10,000//1///1/	\$2,000 - \$10,000 <u></u>
\$10,001 - \$100,000 ACQUIRED DISPOSED	\$10,001 - \$100,000 ACQUIRED DISPOSED
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Partnership X Sole ProprietorshipOther	Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA	▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA
SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
□ \$0 - \$499 □ \$10,001 - \$100,000	□ \$0 - \$499 □ \$10,001 - \$100,000
S500 - \$1,000 OVER \$100,000	S500 - \$1,000 OVER \$100,000
X \$1,001 - \$10,000	\$1,001 - \$10,000
▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF
INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) None or Names listed below	INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) None or Names listed below
Notice of Names listed below	Notice of Names issued below
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR
LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:	LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:
□ INVESTMENT □ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
INVESTMENT INDICENT	
Name of Business Entity, if Investment, or	Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property	Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or	Description of Business Activity or
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$10,001 - \$100,000 \$100,000 DISPOSED	\$100,001 - \$100,000 ACQUIRED DISPOSED
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property	Check box if additional schedules reporting investments or real property
are attached	are attached
Commente	FPPC Form 700 (2017/2018) Sch. A-2

SCHEDULE D Income - Gifts

Name

Jeannine Pearce

► NAME OF SOURCE (Not an Acronym)		► NAME OF SOURCE	(Not an Acronym)	
Children Today		Friends of Bixl		
ADDRESS (Business Address Acceptable	(a)	ADDRESS (Busines		(e)
2951 Long Beach Boulevard			e, Long Beach	
BUSINESS ACTIVITY, IF ANY, OF SOU		BUSINESS ACTIVIT		
Non-Profit	1102	Non-Profit	1, 11 71111, 01 000	1102
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
450	La Part al Ocari		05	Diamen Frank
<u>02 / 11 / 17</u> _{\$} 150	Individual Seat	<u>03 , 09 , 17</u>	\$65	Dinner Event
/\$			\$	
/\$			\$	
► NAME OF SOURCE (Not an Acronym)		► NAME OF SOURCE	(Not an Acronym)	
Housing Long Beach		Matt Revani &	Mershead Kh	azari
ADDRESS (Business Address Acceptable)		ADDRESS (Busines		
525 E. 7th St. Ste. 111, Long	<u> </u>			Beach, Ca 90802
BUSINESS ACTIVITY, IF ANY, OF SOU	RCE	BUSINESS ACTIVIT	Y, IF ANY, OF SOU	RCE
Non-Profit		Restaurant		
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 16 / 17 \$ 40	Individual Seat	04 / 08 / 17	\$120	Dinner Event
\$			\$	
\$			\$	
► NAME OF SOURCE (Not an Acronym)		► NAME OF SOURCE	(Not an Acronym)	
Long Beach Community Acti	on Partnership	Keesal, Young	g and Logan	
ADDRESS (Business Address Acceptable	le)	ADDRESS (Busines	s Address Acceptabl	(e)
117 W. Victoria St., Long Be	ach, CA 90805	400 Oceangat	e #1400, Long	Beach, Ca 90802
BUSINESS ACTIVITY, IF ANY, OF SOU	RCE	BUSINESS ACTIVIT	Y, IF ANY, OF SOU	RCE
Non-Profit		LawFirm		
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>02 / 25 / 17</u> _{\$} 100	Event	<u>04 , 09 , 17</u>	\$40	Event
/\$			\$	
/\$			\$	
Comments:				

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Jeannine Pearce

NAME OF COURCE (Not an Assessment)	NAME OF COURCE (Not as Assessing)
NAME OF SOURCE (Not an Acronym)	NAME OF SOURCE (Not an Acronym)
Downtown Long Beach Association	Congresswoman Linda Sanchez
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
100 W. Broadway #120, Long Beach, Ca 90802	12440 e. Imperial Hwy, Ste. 140, Norwalk, Ca 90650
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non-Profit	Government
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
04 <u>/</u> 08 <u>/</u> 17 _{\$} 290 Event	05 / 12 / 17
\$	
	/\$
NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
International City Theatre	Long Beach Symphony
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
330 E. Seaside Way, Long Beach, Ca 90802	249 E. Ocean Blvd, Long Beach, Ca 90802
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non-Profit	Non-Profit
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
04 / 21 / 17	
\$	/
/ \$	/
▶ NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
The LGBTQ Center	Long Beach Convention Center
ADDRESS (Business Address Acceptable) ADDRESS (Business Address Acceptable)	
2017 E. 4th St., Long Beach, Ca 90814 300 e. ocean Blvd, Long Beach, Ca 90802	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non-Profit	Entertainment Center
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
_04 <u>/</u> 22 <u>/</u> 17	_05
/\$	
Comments:	

SCHEDULE D Income - Gifts

Name

Jeannine Pearce

► NAME OF SOURCE (No	ot an Acronym)		 ► N	NAME OF SOURCE	(Not an Acronym)	
Mental Health An	nerica Los A	ngeles				
ADDRESS (Business Ad	Idress Acceptable)	_	DDRESS (Busines	s Address Acceptab	le)
200 Pine Ave, Su	ite 400, Lon	g Beach, Ca 90802				
BUSINESS ACTIVITY, IF	ANY, OF SOUR	CE	_ <u>-</u>	SUSINESS ACTIVIT	Y, IF ANY, OF SOU	RCE
Non-Profit						
DATE (mm/dd/yy) VA	LUE	DESCRIPTION OF GIFT(S)	_ [OATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 02 / 17 \$_	250	Event	- -		\$	
\$			- -		\$	
/\$_			_ _		\$	
► NAME OF SOURCE (No	ot an Acronym)		▶ N	IAME OF SOURCE	(Not an Acronym)	
ADDRESS (Business Ad	ldress Acceptable)	_	DDRESS (Business	s Address Acceptab	le)
BUSINESS ACTIVITY, IF	ANY, OF SOUR	CE	—	SUSINESS ACTIVIT	Y, IF ANY, OF SOU	RCE
DATE (mm/dd/yy) VA	LUE	DESCRIPTION OF GIFT(S)	_ -	OATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/\$			- -		\$	
/\$			_ -		\$	
/\$_			_ -		\$	
► NAME OF SOURCE (No.	ot an Acronym)		▶ N	IAME OF SOURCE	(Not an Acronym)	
ADDRESS (Business Ad	ldress Acceptable)	_	DDRESS (Busines	s Address Acceptab	le)
BUSINESS ACTIVITY, IF	ANY, OF SOUR	CE	— - E	SUSINESS ACTIVIT	Y, IF ANY, OF SOU	RCE
		DESCRIPTION OF GIFT(S)				DESCRIPTION OF GIFT(S)
/\$_			_ -		\$	
/\$_			_ -		\$	
/\$_			_ _		\$	
Comments:						